## 2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000003268

Entity Name: PHYSICIANS CREEK INC.

## **Current Principal Place of Business:**

2040 NE 163RD ST

#204

MIAMI BEACH, FL 33162

**Current Mailing Address:** 

2040 NE 163RD ST #204

MIAMI BEACH, FL 33162 US

FEI Number: 46-1732380 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AU, ADAM M DO. MD. PHD 2040 NE 163RD ST #204 MIAMI BEACH, FL 33162 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ADAM M. AU 02/05/2024

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title RESPONSIBLE PARTY

Name AU, ADAM

Address 2040 NE 163RD ST

#204

City-State-Zip: MIAMI BEACH FL 33162

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DR ADAM AU DO, MD, PHD, FACOI 02/05/2024

Electronic Signature of Signing Officer/Director Detail

Date

FILED Feb 05, 2024

**Secretary of State** 

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